

MONTHLY SAFETY BRIEFING

CIVIL AIR PATROL SQUADRON: **NCR-KS-** _____

SQUADRON'S NAME: _____

1. The monthly Safety Briefing was given on _____ (date)
2. The briefing was given by: _____ Title: _____
3. Number of personnel attending briefing: _____
(attach KSWG Form 14)
4. The total length of the briefing was: _____
5. Sentinel briefed? ☐ Yes ☐ No **[All flying units must brief the Sentinel.]**

6. The following subject/topics were discussed at the briefing:

Note: Regulations require you to brief two (2) subjects, and you must submit a written copy of the briefing.

(1) _____

(2) _____

7. Comments on briefing or problem areas in the unit that require assistance:

PILOT PROFICIENCY PROGRAM: List any pilot that has completed a part of the program this month, attach a copy of his/her certificate.

Prepare form in duplicate and send original of KSWG Forms 13 & 14 along with the briefing summary to:
Director of Safety
Kansas Wing Headquarters

REPORTS ARE DUE ON THE 6th OF THE MONTH FOLLOWING THE BRIEFING:
Example: (Nov report is due on 6 Dec)

Unit Safety Officer: _____	Grade: _____	CAPID: _____
Home Address: _____	City: _____	Zip: _____
Signature: _____	Date Submitted: _____	
Phone No: _____	E-Mail: _____	